REQUEST FOR PROPOSALS

County Medical Services Program Governing Board
CMSP Local Indigent Care Needs Grant Program

**Eligible Applicants: County Agencies and non-profits from the following 10
CMSP Counties - Alpine, Amador, Calaveras, Del Norte, Mendocino, Modoc,
Napa, San Benito, Sierra, & Tehama**

I.   ABOUT THE COUNTY MEDICAL SERVICES PROGRAM

The County Medical Services Program (CMSP) was established in January 1983, when California law transferred responsibility for providing health care services to indigent adults from the State of California to California counties. This law recognized that many smaller, rural counties were not in the position to assume this new responsibility. As a result, the law also provided counties with a population of 300,000 or fewer the option of contracting with the California Department of Health Services (DHS) to provide health care services to indigent adults.

In April 1995, California law was amended to establish the County Medical Services Program Governing Board (Governing Board). The Governing Board, composed of ten county officials and one ex-officio representative of the Secretary of the California Health and Human Services Agency, is authorized to set overall program and fiscal policy for CMSP. Thirty-five counties throughout California participate in CMSP: Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Imperial, Inyo, Kings, Lake, Lassen, Madera, Marin, Mariposa, Mendocino, Modoc, Mono, Napa, Nevada, Plumas, San Benito, Shasta, Sierra, Siskiyou, Solano, Sonoma, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba.

CMSP is funded by State Program Realignment revenue (sales tax and vehicle license fees) received by the Governing Board and county general-purpose revenue provided in the form of County Participation Fees. CMSP members are medically indigent adults, ages 21 through 64, who meet CMSP's eligibility criteria and are not otherwise eligible for Medi-Cal or Covered California. County welfare departments located in the 35 participating counties handle eligibility for and enrollment in CMSP. All CMSP members must be residents of a CMSP county, and their income level must be less than or equal to 300% of the Federal Poverty Level (based on net non-exempt income).

The Path to Health Pilot Project was launched in 2019 to test the effectiveness of providing primary and preventive services to low-income, undocumented county residents that are not otherwise eligible for CMSP and are eligible for and enrolled in emergency medical services under the Medi-Cal program. Path to Health serves undocumented adults ages 26 - 49 that are enrolled in an emergency services only Medi-Cal program aid code and reside in one of the 35 CMSP counties.

Additionally, CMSP launched the Connect to Care Program in December 2020 to provide primary and preventive services to documented and undocumented county residents, ages 21-64, with income levels between 138% and 300% FPL. The goal for the program is the same as Path to Health – to promote timely delivery of necessary primary and preventive medical services to the target population to improve health outcomes for the population and reduce the incidence of emergency services utilization and inpatient hospitalization by the population.

Member enrollment in Path to Health and Connect to Care occurs through contracted Community Health Centers, including Federally Qualified Health Centers, Rural Health Clinics, and Tribal Health Program, where many program enrollees will also obtain covered primary care services.

The Governing Board administers other projects, including the Health Systems Development grant program, two healthcare workforce development programs, the Specialty Care Access Grant, and the COVID-19 Emergency Response Grant.

II.   ABOUT THE CMSP LOCAL INDIGENT NEEDS PROGRAM

Through the Local Indigent Care Needs Program (LICN Program), the Governing Board seeks to expand the delivery of locally directed indigent care services for low-income uninsured and under-insured adults that lack access to health, behavioral health, and associated support services in CMSP counties. The principal goals of the LICN Program are to promote timely delivery of necessary medical, behavioral health and support services to locally identified target populations; link these populations to other community resources and support; and improve overall health outcomes for these target populations.

A. Program Tracks

The LICN Program has two program tracks.

Track One – Planning Project Grants: Grants shall be available to CMSP county or non-profit agency applicants with demonstrated capacity to bring local stakeholders together, who intend to apply for an Implementation Program Grant and have the desire to develop an Implementation Plan in accordance with the requirements of the LICN Program (Implementation Plan).

Applying for a Planning Project Grant is optional. Applicants may apply directly for an Implementation Program Grant if they choose.

Track Two – Implementation Program Grants: Grants shall be available to CMSP county or non-profit agency applicants to support concrete, defined Implementation Plans that address the goals and objectives of the LICN Program. Applicants must show experience bringing local stakeholders together and their role providing health and/or human services in the community for low-income and/or indigent residents in CMSP counties.

B. Target Populations

The target populations for LICN Implementation Program efforts must focus on one or more of the following uninsured or under-insured groups within one or more CMSP count(ies):

1) Adults that need follow up specialty services and/or other support services following an inpatient hospital stay
2) Adults receiving inpatient hospital care that have limited home or community support to facilitate healing and recovery
3) Adults with complex health or behavioral health conditions that have housing and/or transportation challenges which impede their ability to obtain necessary health care services
4) Adults with health and/or behavioral health conditions released from incarceration

Within the target populations outlined above, program activities may further narrow the focus of efforts to one or more of the following sub-groups within the target populations:

- Homeless adults
- Adults with chronic health or behavioral health conditions; and/or
- Adults in need of pain management support

Projects do **not** need to only support CMSP members or CMSP-eligible individuals.

C. Four Alternative Components for Local Indigent Care Needs Programs

Implementation Programs shall incorporate **at least one** of the following four program components into their program strategies:

1) <u>Local-Level Care Management</u>

Develop Care Management interventions that:

- Provide linkage to other services and supports in the community that facilitate management of each client's needs
- Are tailored to meet individual client service needs and involve clients as decision makers in the care planning process
- Have capacity to meet with clients in community locations such as at physicians' offices, hospitals, county social services departments, homeless shelters, or client's homes (as appropriate)
- Provide data system capacity that is sufficient to comprehensively document and track Care Management services provided to clients and provide a mechanism that assures timely and appropriate identification and care management service needs

2) <u>Continuity of Care</u>

Develop county-wide or regional Continuity of Care strategies that:

- Facilitate linkages across the continuum of care, specifically inpatient care to appropriate outpatient care. Linkages may include access to specialty care, primary

care, prescription medical support, home health, hospice, long-term care, mental health treatment, substance abuse treatment, and durable medical equipment.

3) Enabling Services

Establish or strengthen existing mechanisms that:

- Engage clients in obtaining nutritional support, housing, transportation, legal assistance, and income assistance to support LICN Program goals through referrals to existing service providers
- Provide access to enabling services not otherwise available in the community through new service creation or expansion of currently limited services. Equipment purchases, expansions of current facilities, and/or renovation/remodeling of current facilities may be considered under this initiative. No LICN Program grant funds may be used for the lease/ purchase of land, buildings, or new construction. (Further detail is available in Appendix B LICN Allowable vs. Unallowable Use of Funds resource located on the CMSP website).
- Establish effective working relationships with county welfare department(s) in their service area to help facilitate applications for health coverage and other public assistance

4) Disease Management

Establish or strengthen existing mechanisms to:

- Halt or decrease the severity of the conditions of clients with chronic, ongoing health and/or behavioral health conditions through such strategies as symptom management, medication compliance, adherence to treatment plans, and lifestyle changes

D. Technical Assistance Contractor Support to Grantees

Technical Assistance (TA) services will be available to Planning and Implementation Program Grantees through the following services:

Planning Grants

- Web-based training and feedback
- Quarterly TA conference calls and/or webinars to foster a learning community across grantees
- Monthly consults (calls, emails and/or site visits)
- Planning toolkits and relevant resources

Implementation Grants

- Implementation Program conferences
- Quarterly TA conference calls and/or webinars to foster a "learning community" across grantees
- One in-person or virtual site visit during the second year of the Implementation Grant project period

- Monthly consults (calls, emails)
- Ad Hoc TA Consultant support can be provided upon request

III.   ELIGIBLE APPLICANTS

Eligible applicants for this program are a county or a non-profit organization in one of the following CMSP counties:

- Alpine
- Amador
- Calaveras
- Del Norte
- Mendocino

- Modoc
- Napa
- San Benito
- Sierra
- Tehama

A. Planning Project Grants: Lead Agency Applicant and Project Partner Requirements

- Planning efforts must be focused within one or more of the eligible CMSP counties.
- The lead agency applicant must be either an eligible CMSP county agency or department or a not-for-profit organization and must have demonstrated capacity to bring together varied stakeholders within the county or region.
- The lead agency and all key Planning Project partners must be in good standing with the Governing Board.
- Planning Project Grant applicants must have support, as demonstrated by Letters of Commitment, from at least one local hospital or at least one primary care provider such as a clinic, private practice physician, or physician group.
- In addition, Planning Project Grant applicants must have demonstrated support, as evidenced by Letters of Commitment, from at least two of the following CMSP county agencies or departments: Health/Public Health, Social Services/Welfare, Mental Health, Drug and Alcohol Services or Probation.

B. Implementation Program Grants: Lead Agency Applicant and Project Partner Requirements

- Implementation efforts must be focused within one or more CMSP counties.
- The lead agency applicant must be either an eligible CMSP county agency or department or a not-for-profit organization. The lead agency does not need to be located within a CMSP county; however, all project performance must occur within a CMSP county.
- The lead agency applicant must possess organizational capacity to carry out its Implementation Plan in accordance with the requirements described in this RFP.
- The lead agency and all key implementation project partners must be in good standing with the Governing Board.
- Grant applicants must have support, as demonstrated by either Letters of Commitment or Memorandums of Understanding, from at least one local hospital and at least one primary care provider such as a clinic, private practice physician, or physician group.

- Grant applicants must have the demonstrated support, as evidenced by either Letters of Commitment or Memorandums of Understanding, of at least two of the following CMSP county agencies or departments: Health/Public Health, Social Services/Welfare, Mental Health, Drug and Alcohol Services and Probation.
- The lead agency applicant should have the support of other local providers of safety-net services, as demonstrated by either Letters of Commitment or Memorandums of Understanding.

IV.   TENTATIVE PROJECT TIMELINES

Below is the anticipated timeline for the Summer 2022 Round of the Local Indigent Care Needs Grant Program RFP. This timeline is tentative and subject to change at Governing Board discretion.

Local Indigent Care Needs Grant: Summer 2022 Grant Timeline	
Date	**Activity**
06/15/22	RFP Released
06/29/22	Replicating Success – Project Highlights Webinar 9:30AM PST
07/13/22	RFP Assistance Webinar 10:00AM PST
07/13/22	Letters of Intent Due by 3:00PM PST
08/01/22	Proposals Due by 3:00PM PST
09/22/22	Governing Board Proposal Review and Approval

V.   ALLOCATION METHODOLOGY

The Governing Board, in its sole discretion, may fund or not fund Planning or Implementation Grants in this round. Total Local Indigent Care Needs grant awards and technical assistance provided by the Governing Board may equal up to fifty-million dollars ($50,000,000) over the life of the program.

A. Planning Project Grants

One-time awards up to $50,000 per project (or up to $75,000 if the project serves more than one CMSP county) may be made for Planning Project Grants. Planning efforts are expected to last no more than 12-months and produce a final Implementation Plan.

Allowable vs. Unallowable Expenses
Please refer to the full list of allowable vs. unallowable expenses on the [CMSP website](#).

In-direct Costs/Overhead Expenses
No project funds shall be used for administrative and/or overhead costs not directly attributable to the project. Administrative and/or overhead expenses shall equal 10% or less of the total project expenditures. Indirect costs also include office expenses attributable to managing an office including photocopies, postage, telephone charges, utilities, facilities, educational materials, and general office supplies.

In-Kind/Matching Funds Required
Awardees are required to provide a minimum of 10% in-kind and/or matching funds of the Planning Grant Program award amount per year. In-kind and/or matching funds may be provided solely by the lead applicant or through a combination of funding sources.

B. Implementation Grants

Awards up to $500,000 per year per project may be made for Implementation Program Grants. Grants may be provided for up to three years.

Allowable vs. Unallowable Expenses
Please refer to the full list of allowable vs. unallowable expenses on the CMSP website.

In-direct Costs/Overhead Expenses
No project funds shall be used for administrative and/or overhead costs not directly attributable to the project. Indirect costs also include office expenses attributable to managing an office including photocopies, postage, telephone charges, utilities, facilities, educational materials, and general office supplies. Administrative and/or overhead expenses shall equal 10% or less of the total project expenditures.

In-Kind/Matching Funds Required
Awardees are required to provide a minimum of 10% in-kind and/or matching funds of the Implementation Grant Program amount per year. In-kind and/or matching funds may be provided solely by the lead applicant or through a combination of funding sources.

Evaluation Expenses
Implementation Programs are required to budget a minimum of 10% total project expenditures for Evaluation Expenses. Evaluation expenses may include time spent performing data collection, analyzing data, or preparing reports.

Equipment and Renovation Expenses
No LICN Program grant funds may be used for the lease/purchase of land, buildings, or new construction. Equipment purchases, expansions of current facilities, and/or renovation or remodeling of current facilities may be considered under this initiative.

VI.   AWARD METHODOLOGY

Planning Project Grant proposals will be reviewed and scored based upon the following criteria:

1) Target Population (10%)
2) Planning Questions (15%)
3) Planning Goals (15%)
4) Proposed Planning Activities (15%)
5) Work Plan and Timeline (15%)
6) Organization and Staffing (10%)
7) Letters of Commitment/Support (5%)
8) Budget (15%)

Implementation Program Grant proposals will be reviewed and scored based upon the following criteria:

1) Project Narrative (50% in total)
   - Statement of Need (5%)
   - Target Population (10%)
   - Proposed Project/Approach (20%)
   - Organization and Staffing (15%)
2) Implementation Work Plan (15%)
3) Budget (15%)
4) Logic Model (5%)
5) Data Collection and Evaluation Method (10%)
6) Letters of Commitment/ Support (5%)

The foregoing criteria are for general guidance only. The Governing Board will award Grants based on the proposals the Governing Board determines, in its sole discretion, are in the best interest of CMSP and the Governing Board.

Grant proposals which, in the Governing Board's sole discretion, are deficient, are not competitive, are non-responsive, do not meet minimum standards or are otherwise lacking in one or more categories may be rejected without further consideration.

The proposal process is competitive and not all proposals may be funded or funded in the amounts requested. All proposals will be ranked in order of their ability to promote timely delivery of necessary medical, behavioral health and support services to locally identified target populations, to link these populations to other community resources and support, and to improve overall health outcomes for these target populations.

An applicants' Planning Project or Implementation Grant proposal must achieve a minimum score of 85% and must achieve a ranking, in comparison with all other submitted proposals, that merits funding approval.

VII.   PLANNING PROJECT GRANT PROPOSAL FORMAT AND REQUIREMENTS

A. Planning Grant Cover Sheet

Please complete the Planning Project Grant Cover Sheet template located on the [CMSP website](#).

B. Planning Grant Proposal

Please complete the Planning Project Grant Proposal template located on the [CMSP website](#).

1) Applicant Name
   - List the organization applying for LICN funding.

2) Project Title
   - List project title.
3) Technical Assistance Needs
   - Identify Technical Assistance Needs that will be necessary post-award.
4) Target Population
   - Describe the target population, and any sub- populations, to be served in the proposed project.
   - Define the characteristics of the target population and discuss how the proposed project will identify target population members.
   - Include background information relating to the proposed CMSP county or counties to be served, unique features of the community or communities, and other pertinent information that helps explain the problem or need within the community.
5) Planning Questions
   - What questions does the Planning Project hope to answer about the target population(s), service delivery, and/or resources through the planning process?
6) Planning Goals
   - What are your organization's specific goals during the planning process?
7) Proposed Planning Activities
   - Broadly discuss the proposed activities to be performed in the Planning Project.
   - How will your organization effectively complete and produce a framework for an Implementation Grant Program Proposal?
8) Work Plan and Timeline
   - Create a Planning Project Work Plan and Timeline using the CMSP provided Planning Grant Work Plan and Timeline template for completion of implementation, contracting, consultant/staff recruitment, evaluation, reporting, and sustainability planning activities.
   - Download the Planning Project Work Plan and Timeline template on the CMSP website.
9) Project Partners
   - Who are your proposed key partners?
   - What will your partners role be during this project?
10) Organization and Staffing
   - Describe the lead applicant's organizational capacity to bring local stakeholders together to undertake a planning process that leads to the development of a framework for an Implementation Program Proposal.
   - Clearly delineate the roles and responsibilities of the applicant organization(s) and key partner(s).
   - Identify a project manager with day-to-day responsibility for key tasks such as leadership, monitoring ongoing progress, preparing project reports, and communicating with other partners.
   - Describe any relevant prior efforts undertaken by the lead applicant and/or partners.
   - Describe the lead agency and all key partners' roles within the delivery system.
   - Identify additional organizations and/or agencies with which the lead agency wishes to establish relationships.

C. Letters of Commitment

Letters of Commitment will be utilized in scoring and must be submitted as a part of the proposal. Any letters submitted outside of the proposal will not be considered in scoring the proposal.

1) Planning Project Grants must have the support, as demonstrated by Letters of Commitment, from at least one local hospital or one primary care provider such as a clinic, private practice physician, or physician group.
2) Planning Project Grants must have the demonstrated support, as demonstrated by Letters of Commitment, from at least two of the following CMSP county agencies or departments: Health/Public Health, Social Services/Welfare, Mental Health, Drug and Alcohol Services, and Probation. Planning Project Grants serving more than one CMSP county will need to obtain the minimum of two Letters of Commitment from CMSP county agencies or departments within each CMSP county to be served. Additional letters from other interested agencies and stakeholders may be provided.

An example Planning Project Letter of Commitment template is available for download on the CMSP website.

D. Budget and Budget Narrative

Complete the Planning Grant Budget and Budget Narrative located on the CMSP website. The budget narrative must detail expense components that make up total operating expenses and the source(s) of in-kind and/or direct matching funding. Please describe all administrative costs and efforts to minimize use of project funds for administrative and overhead expenses. No project funds shall be used for administrative and/or overhead costs not directly attributable to the project. Administrative and/or overhead expenses shall not exceed 10% of total project expenditures. Briefly explain any expenses listed in the Budget Narrative whose purpose may be ambiguous to a reviewer.

Please note, prior to contracting, the Governing Board reserves the right to request copies of the applicant's most recent audited financial statements.

E. Authorized Signature

The Grant Proposal Authorized Signature document is located on the CMSP website.

VIII. IMPLEMENTATION PROGRAM GRANT PROPOSAL FORMAT AND REQUIREMENTS

A. Implementation Program Grant Cover Sheet

Please complete the Implementation Grant Cover sheet template located on the CMSP website.

B. Project Summary

Create a Project Summary and describe the proposed project concisely to include the following items:

1) Project goals
2) Project objectives
3) The project's overall approach (including target population and key partnerships),
4) Any prior efforts to address the target population
5) Any previous applicant experience working with CMSP
6) Anticipated outcomes and deliverables
7) The project's sustainability plan once the grant has ended

C. Implementation Program Grant Proposal Narrative

This document is not to exceed 10 pages and must include:

1) Clear Statement of Problem or Need Within Community

All Implementation Programs should focus on identified needs of one or more eligible target populations within the community. Please describe the target population, and any sub-populations, to be served in the proposed project. Define the characteristics of the target population and discuss how the proposed project will identify members of the target population. Please include the total estimated number of individuals your organization will serve each year over the three-year grant period. Include background information relating to the proposed CMSP county or counties to be served, unique features of the community or communities, and other pertinent information that helps explain the problem or need within the community.

Please identify current sources of health and behavioral health care for the target population(s), strengths in the health care delivery system, and existing or foreseen challenges in the delivery system. Applicants should use county-level and/or community-level data and other relevant data to demonstrate need.

2) Description of Proposed Project

Provide a summary of current and prior efforts to address the needs to the target population(s). Also, describe the range of project activities to be performed that will meet the identified needs of the target population.

All activities discussed should correspond with the items listed in the Logic Model (see Section VIII. D. below) and the Implementation Work Plan and Timeline. This section should be used to clearly describe steps necessary for program development efforts to be effectively undertaken and for program implementation to be carried out. This section should also describe which one or more of the following core LICN Program components will be incorporated into the program:

- Local-level Care Management
- Continuity of Care
- Linkages to Enabling Services
- Disease Management

As part of describing the proposed project, create a workplan and timeline for completion of all implementation, contracting, consultant/staff recruitment, evaluation, reporting, and sustainability planning activities.

Use the required Implementation Work Plan and Timeline template available for [download](#) on the CMSP Website. The template may be incorporated into the Project Narrative document or be submitted as a separate document.

3) Description of Planning Efforts

Provide a detailed description of how your organization is prepared to implement this project. List any programmatic changes the organization will need to make or objectives that will need to be met before grant program can be implemented

4) Organization and Staffing

This section should describe and demonstrate organizational capability to implement, operate, and evaluate the proposed project. Additionally, information provided should clearly delineate the roles and responsibilities of the applicant organization(s) and key partners and include the following:

- An organizational chart and description of organizational structure, lines of supervision, and management oversight for the proposed project, including oversight and evaluation of consultants and contractors
- Identification of a project manager with day-to-day responsibility for key tasks such as leadership, monitoring ongoing progress, preparing project reports, and communicating with other partners; and,
- The roles, qualifications, expertise, and auspices of key personnel
- Describe the lead agency and all key partner roles within the delivery system.
- Identify additional organizations and/or agencies with which the lead agency wishes to establish relationships with through the implementation process.
- Identify any staff that will need to be recruited and hired upon Project inception.

The organizational chart should only include staff, key partners, and additional partners to be recruited for the proposed project.

5) Sustainability Planning

Awarded Implementation Grant projects will be required to produce a sustainability plan during the second year of the grant. Please outline initial ideas about how some or all the proposed grant activities can be sustained into the future after grant funding ends.

- What organizational or funding sources will the applicant utilize after the 3-year grant period ends?
- What key partners will assist in sustaining this project effort?
- Will the project rely on any state-funded programs such as CalAIM to support its continuation?

D. Logic Model

All applicants are required to submit a logic model. A logic model is a series of statements linking target population conditions/circumstances with the service strategies that will be used to address those conditions/circumstances, and the anticipated measurable outcomes. Logic models provide a framework through which both program staff and the TA consultant can view the relationship between conditions, services, and outcomes. All logic models should include a description of the 1) target population; 2) program theory; 3) activities; 4) outcomes; and 5) impacts. All logic models should include **quantifiable** outcome measures as detailed in the logic model resource.

The required Logic Model template is available as a word document for download on the [CMSP website](). This document may not exceed 2-pages.

E. Data Collection and Reporting

All applicants shall create a document that presents their plan for data collection, analysis, and reporting. This document must specify data to be collected and reported upon, and how that data set will be used to document the outcomes and impacts expected to be achieved through the Project, as described in the Logic Model. Data must include demographic data in addition to the project's chosen data sets. Examples of demographic data points could include age, gender, nationality, income-level, and geographic distribution. If awarded, each Project will be required to report upon this core set of data elements. For sample data set ideas, see the informational resource Appendix C Data Collection located on the [CMSP website]().

F. Budget and Budget Narrative

Complete the required Implementation Grant Budget and Budget Narrative template. The budget narrative must detail expense components that make up total operating expenses and the source(s) of in-kind and/or direct matching funding. Please describe all administrative costs and efforts to minimize use of project funds for administrative and overhead expenses. No project funds shall be used for administrative and/or overhead costs not directly attributable to the project. Administrative and/or overhead expenses shall not exceed 10% of total project expenditures. In the Budget Narrative, briefly explain any expenses whose purpose may be ambiguous to a reviewer.

The required Implementation Grant Budget and Budget Narrative template is available for download on the [CMSP website](). Please note, prior to contracting, the Governing Board reserves the right to request copies of the applicant's most recent audited financial statements.

G. Letters of Commitment or Memorandums of Understanding

Letters of Commitment are required from all key partners and will be utilized in scoring. Letters should detail the key partner's understanding of the proposed Implementation Program and their organizations' role in supporting or providing direct services. Implementation Programs must have support, as demonstrated by either Letters of Commitment or Memorandums of Understanding, from at least one local hospital and one primary care provider such as a clinic, private practice physician, or physician group. If the applicant organization is a hospital or primary care provider, it does not need to obtain a Letter of Commitment from another hospital or primary care provider or find another partner to fill this role.

In addition, Implementation Program Grants must have support, as demonstrated by either Letters of Commitment or Memorandums of Understanding, of at least two of the following CMSP county agencies or departments: Health/Public Health, Social Services/Welfare, Mental Health, Drug and Alcohol Services, and Probation. Implementation Program Grants serving more than one CMSP county will need to obtain the minimum of two Letters of Commitment or Memorandum of Understanding from CMSP county agency or departments within each county to be served.

Finally, the lead agency applicant should have the support of other local providers of safety-net services. Additional Letters of Commitment or support from other interested agencies and stakeholders may be provided.

All letters of commitment or support must be submitted as a part of the proposal. Any letters submitted outside of the proposal will **not** be considered in scoring the proposal. An example Letter of Commitment is available for download on the CMSP website.

H. Authorized Signature

The Grant Proposal Authorized Signature document is located on the CMSP website.

IX. PROPOSAL INSTRUCTIONS

A. All proposals must be complete at the time of submission, must follow the required format and use the forms and examples provided:

  1) The type font must be Arial, minimum 11-point font.
  2) Text must appear on a single side of the page only with margins at a minimum of 0.5."
  3) Assemble the proposal in the order and within the page number limits listed with the Proposal Format & Requirements section.
  4) Clearly paginate each document.

B. All proposal documents and templates are available for download on the CMSP website.

C. The proposal must be signed by a person with the authority to legally obligate the Applicant.

D. Submit all proposals via email to grants@cmspcounties.org.

The following **Planning Grant** proposal documents must be submitted**:**

    1) Planning Grant Cover Sheet
    2) Planning Grant Proposal
    3) Planning Grant Workplan and Timeline
    4) Letters of Commitment
    5) Planning Grant Budget and Budget Narrative
    6) Grant Proposal Authorized Signature

Please note items 1-6 above may be found on the CMSP website.

The following **Implementation Grant** proposal documents must be submitted:

    1) Implementation Program Cover Sheet
    2) Grant Proposal Summary
    3) Grant Proposal Narrative
    4) Implementation Work Plan & Timeline
    5) Implementation Grant Budget and Budget Narrative
    6) Logic Model
    7) Data Collection and Reporting
    8) Letters of Commitment
    9) Grant Proposal Authorized Signature

Please note items 1 and 4-9 may be found on the CMSP website.

E. Do not provide any materials that are not requested, as reviewers will not consider those materials.

F. All proposals are due by **Monday, August 1, 2022, at 3:00 PM PST**. They must be complete and received at grants@cmspcounties.org by this deadline.

X. PROPOSAL ASSISTANCE

A. RFP Assistance Webinar Information

To assist potential applicants, Governing Board staff will conduct two webinars. Applicants are encouraged to participate in both and to bring any questions they have regarding LICN Program requirements or the proposal process.

Dates, times, and links to the webinars are as follows:

CMSP LICN RFP: Replicating Success – Project Highlight Webinar
Wednesday, June 29, 2022, at 9:30 AM PST
https://us06web.zoom.us/j/88337330176?pwd=RWlPMU1kTGFSTFpya3JwNFJBeGluZz09
Zoom Meeting Number: 883 3733 0176
Zoom Password: LICNAPPLY

CMSP LICN RFP: Assistance Webinar
Wednesday, July 13, 2022, at 10:00 AM PST
https://us06web.zoom.us/j/82214197824?pwd=YXJPN21IYThVRXJvYzBvbHIDSmpndz09
Zoom Meeting Number: 822 1419 7824
Zoom Password: LICNAPPLY

B. Frequently Asked Questions (FAQ)

CMSP staff will post a Frequently Asked Questions document to the CMSP website following the RFP Assistance webinar.

C. Letter of Intent (LOI)

The Governing Board requests that all likely grant applicants submit a Letter of Intent (LOI) to the Board. While the LOI is not required, receipt of an LOI from all likely applicants will assist the Governing Board in planning for proposal reviews and processing. Please submit the LOI no later than **July 13, 2022, 3:00 PM PST** to grants@cmspcounties.org. There is no required format or template for the LOI. In the LOI, likely applicants should state whether they intend to apply for a Planning or Implementation Program Grant and provide the name of the CMSP county or counties they anticipate serving.

D. Project Contact Information

Please direct any questions regarding the RFP to:

Laura Moyer, Grants Administrator
CMSP Governing Board
1545 River Park Drive, Suite 435
Sacramento, CA 95815
(916) 649-2631 ext. 110
grants@cmspcounties.org

XI. GENERAL INFORMATION

A. The Governing Board shall have no obligation to provide Grant funding or continue to provide Grant funding at any time.

B. All proposals become the property of the Governing Board and will not be returned to the Applicant unless otherwise determined by the Governing Board in its sole discretion.

C. Any costs incurred by the responding Applicant for developing a proposal are the sole responsibility of the responding Applicant and the Governing Board shall have no obligation to compensate any responding Applicant for any costs incurred in responding to this RFP.

D. Proposals may remain confidential during this process only until such time as determined by the Governing Board in its sole discretion. Thereafter, the Governing Board may treat all information submitted by a responding Applicant as a public record. The Governing

Board makes no guarantee that any or all portions of a proposal will be kept confidential, even if the proposal is marked "confidential," "proprietary," etc.

E. The Governing Board reserves the right to do the following at any time, at the Governing Board's sole discretion:

1) Reject all proposals or cancel this RFP
2) Waive or correct any minor or inadvertent defect, irregularity, or technical error in any proposal
3) Request that certain or all Applicants supplement or modify all or certain aspects of their respective proposals or other materials submitted
4) Modify the specifications or requirements for the Grant program in this RFP, or the required contents or format of the proposals prior to the due date
5) Extend the deadlines specified in this RFP, including the deadline for accepting proposals
6) Award, or not award, any amount of Grant funding to any Applicant